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	Substitute for form 1449/PTO		Complete if Known			
•			Application Number	1 5		
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INFORMATION DISCLOSURE				First Named Inventor	MICHAEL PASHLEY	
	STATEMENT			Art Unit		
(Use as many sheets as necessary)			necessary)	Examiner Name		
Sh	et 1	of	1	Attorney Docket Number	US020622	_

				DOCUMENTS	
Examiner Initials*	Cite No.	Document Number Number-Kind Code ^{2 (# known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear		
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Examiner Signature	haron	Payre	Date Considered	5/28/07
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